

# Individual

## Demographic Reporting Form

Positive Alternatives

Date: April-June 2015

Grantee Name: North Region Pregnancy Care Center

### 1. Client Age Range:

Under 15	15-17	18-19	20-24	25-29	30-34	35+	Unknown age
		1	3		1		

### 2. Client Pregnancy Status:

1st Trimester	2nd Trimester	3rd Trimester	Post-partum	Pregnancy Status Unknown
2	2		1	

### 3. Client Marital Status:

Married	Not Married	Marital Status Unknown
1	4	

### 4. Client Race:

Race: White	Race: African American	Race: African-American	Race: American Indian	Race: Asian Pacific	Race: Other/ Multi Race	Race: Unknown
4		1				

### 5. Client Ethnicity:

Hispanic Ethnicity: Yes	Hispanic Ethnicity: No	Ethnicity: Unknown
	5	